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(195) Department.

[illegible] SERIES

G.O. No. [illegible] P.W.

Dated [illegible]

[Despatch Abstract.]

T.B. - B.C.G. VACCINATION - Propaganda among boys and girls in educational institutions - Papers recorded.

Copy of letter dated the 13th/14th August 1948, from Sri P.V. Benjamin,MBBS,TDD.(Wales), Tuberculosis,Adviser, Government of India, Technical Adviser, Tuberculosis Association of India, Camp:Arogyavaram P.O., Chittoor District (South India) to the Hon'ble Shri Avanashalingam Chettiar, Minister for Education, Madras.

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In continuation of my letter to you dated 26th July, 1948 I write to inform you that I wrote to the Director Public Health Madras on the same day and herewith enclosed is a copy of the letter and the Press Note they have issued which I think will convince you that the BCG vaccination is being introduced after mature consideration of the Public Health Department, Madras and the Government of India and it is not only certified that it is a safe procedure but its use is advocated. I hope this will help you to issue an order to the heads of various educational institutions to help the BCG vaccination team in carrying out this programme among the school and college boys and girls.

Copy of Government of India letter from the _____t Secretary to all Provincial Governments and Local Administrations referred above.

"I am directed to forward herewith to Provinces 10 copies of Press Note on B.C.G. vaccination and to request that wide publicity may be given to its contents through the Provincial Public Health authorities".

P R E S S N O T E.

In practically all the civilised communities of the World tuberculosis, as a cause of death is undoubtedly the most important of infectious diseases. Based on a few random representative surveys it has been estimated that over 500,000 people die from tuberculosis every year in India. It is responsible, in addition for an enormous amount of prolonged disability, suffering and economic loss.

The ubiquitous nature of the disease is shown by the fact that more than half of the population particularly in urban areas becomes infected by the age of 20, and nearly all sometimes during life. Fortunately for us, however, only a small proportion of those infected develop progressive or fatal disease. It is also estimated that in at least 80% spontaneous healing occurs. The primary infection therefore usually provokes immunity in the vast majority of people to a degree sufficient to enable the subject to escape further infection.

It appears clear that human beings have the capacity to acquire resistance to tuberculosis infection. Since the discovery of the tubercle bacillus by Kock in 1882, research workers have bee trying to evolve an effective method of artificial immunisation. So far, only immunisation with but a tentuated strains of true tubercle bacilli, called B.C.G. has produced the most promising results.

B.C.G. vaccination was first introduced in France by Calmetta in 1921. Since then, it has been used in an ever increasing measure in most of the European countries particularly Scandinavia. When Calmette advocated the administration of B.C.G. to new-born infants, it was with no confidence that a firm and lasting immunity would result. But he believed that it would provide sufficient protection to prevent a natural infection occuring during the first year or two of life, when it is most dangerous and that sufficient

resistance would remain to enable later infections to be overcome and to leave in their turn the higher grade of immunity associated with such recovery. In fact, this sequence of artificial virulent infection followed by natural virulent infection and recovery represents, perhaps the most effective result which any form of artificial immunisation can produce. B.C.G. Vaccination was particularly advocated for children exposed to severe natural infection from diseased parent or relatives and it was among such classes that the most successful results have been claimed in France.

The harmlessness of B.C.G. is established beyond doubt by practical use on a scale exceeded only by a few proved methods of immunisation such as those for small-pox, diphtheria and the enteric infection. A very considerable degree of immunising efficiency is indicated by the most reliable from other countries particularly those from Norway and Sweden. Though Calmette gave the duration of immunity following B.C.G. vaccination as of the order of 2 to 4 years, recent studies from Norway and Sweden suggest that the immunity might last for 5 to 6 years or even more.

The Ministry of Health, Government of India after careful consideration of the question in all its aspects have come to the conclusion that mass vaccination with B.C.G. will be a cheap and effective method of reducing the incidence of tuberculosis which is assuming epidemic proportions at the present moment in the country. It has, therefore, been decided to introduce B.C.G. Vaccination primarily on a limited scale under strict supervision and control of the Central Government.

The World Health Organisation have very kindly agreed to send a B.C.G. Demostration Team to India by about the end of May, 1948. The object of the visit is not only to popularise B.C.G. Vaccination but also to show to the authorities concerned the process of manufacture of the vaccine and the technique of administration. The B.C.G. Laboratory will be located for the present at the King Institute of Preventive Medicine, Guindy, while the field component of the team will demonstrate the process of vaccination in one or more places selected by the Government for the purpose.

The W.H.O. Team is expected to work in India for a peri of four months. In order to continue and expand the work initiated by the team, the Government of India repose to select an experienced bacteriologist and a technician and give them special training in the manufacture of the vaccine. As it is extremely important to maintain a uniform standard of potency and efficiency and to prevent all possible chances of contamination, it is proposed to confine the production of Vaccine to one or two Laboratories under Central Government Control, and prohibit the sale of B.C.G. Vaccine by any commercial firms.

GOVERNMENT OF MADRAS.
EDUCATION & PUBLIC HEALTH DEPARTMENT.

MEMORANDUM NO.62219 G2/48-2,P.H., dated 18-11-1948.

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Sub: Tuberculosis - B.C.G.Vaccination.
Ref: From the Tuberculosis Adviser to the Government of India, D.O. dated 14th August 1948 addressed to the Hon'ble Minister for Education.

The Tuberculosis Adviser to the Government of India has suggested the issue of a circular to the heads of various educational institutions in the Province to help the B.C.G.Vaccination team in carrying out the programme among boys and girls in Colleges and Schools. As the T.B. Association of Madras is already having a proposal to entrust its special sub-committee with the work relating to propaganda for B.C.G. Vaccination (vide last paragraph of the proceedings of the T.B. Association's meeting held on 19th July 1948, the Government consider that it would be sufficient if the Sub Committee sends its pamphlets and press notes etc.to the Heads of the various educational institutions also for publicity to students. The Hon. Secretary of the Association is requested to take necessary action in the matter.

Sd/- x x x
Secretary to Government.

To The Honorary Secretary,
T.B.Association of Madras.
To The Director of Public Instructions.
To The Surgeon General.
Copy to the T.B.Adviser, Government of India, Arogyavaram P.O., Chittoor District.
Copy to the Director of Information & Publicity.

(True copy)

Superintendent,
MADRAS RECORD OFFIC

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Note file.

E & P.H.Deptt.

In his letter at page 1 c.f. Dr. Benjamin requests the issue of a circular to the heads of various educational institutions to help the B.C.G. Vaccination team in carrying out the programme among the school and college boys and girls. Dr. Benjamin has recently submitted a scheme for health programme for Madanapalle with special reference to tuberculosis. The scheme provides for an intensive tuberculosis survey in Madanapalle town with arrangements for an educational and preventive campaign including the care and treatment of the cases of Tuberculosis brought to light by such a survey. The Government have agreed to the introduction of his B.C.G. Vaccination scheme at Madanapallee subject to certain alterations and with a view to include the scheme in the list of Post War Schemes to be taken up during the current year itself they/~~addressed~~ addressed the Government of India for their sanction to debit half of the expenditure on the scheme to the Central Government's Block Grant for 1948-49. India's reply is awaited. The Government have also generally approved the scheme prepared by the sub-committee for the control of tuberculosis in the city of Madras. This scheme for Madras City provides among other things for the training of three teams in the technique of B.C.G. Vaccination and the recording of data. Each team will consist of a doctor, a nurse and two clerks and will conduct B.C.G. Vaccination in special Groups in the following order:

have/

(1) Nurses and Medical students;

(2) University students;

(3) Students of High Schools;

(4) New born infants at the Government Hospital for Women and Children, Egmore.

(5) Contacts of open cases which have been removed from their homes to an institution; and

(6) workers in selected factories.

Pending the provision of funds for the formation of the teams the Government have accepted the attractive proposal that the two medical officers now working in the T.B.Institute Egmore for home visiting and contact examination may be deputed to undergo the necessary training so that they in their turn train others. As regards propaganda for B.C.G. Vaccination, attention is invited to the report at 'M' at page 49 c.f. in the L.F. It will be seen therefrom that the Central T.B. Association at Delhi is preparing a few pamphlets which can be distributed and ~~publish~~x published in the dailies. The local Association proposes to form a special sub committee for purposes of propaganda. The local T.B. Association may be asked to circularise their pamphlets and press notes when issued on the efficacy of B.C.G. among the school and college boys and girls through their heads of educational institutions.

May be circulated to H.M.(Edn) through H.M.(P.H) with reference to the former minutes at p.1 c.f.

Sd. x x
21-10-48.

A draft memo is put for approval.

Sd/- x x

*I think this will be sufficient for the present.
Intd.21/10.

(True copy)

Superintendent.
Madras Record Office.

KRVD.13.6.

(Issued as Memo No.62219 G2/48-2 P.H., dated 18-11-48)

With reference to Deputy Secretary's orders on page 6 ante the papers may now be

G.O.Ms.No. 3997, P.H., dated 26-11-1948

R e c o r d e d.

Abstract. Tuberculosis - B.C.G. Vaccination - Propaganda among boys and girls in educational institutions - Papers recorded.

(True copy)

Superintendent,
Madras Record Office.

KRVD.13.6.

16/6.